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ON THE PRINCIPLES INVOLVED IN THE TREATMENT OF STRANGULATED HERNIA.

BY GEORGE J. ZIEGLER, M.D.

To the Editor of the Boston Medical and Surgical Journal.

SIR,—I have been much pleased and interested with the report, in your excellent Journal, of several cases of strangulated hernia reduced so speedily and effectually by the influence of opium, yet somewhat disappointed that the writers thereof have not given a detailed description of the *modus operandi* of this and analogous remedies, or, rather, the *principles* upon which such treatment is founded. This is somewhat of a fault or inadvertency with writers generally, and yet it is of the utmost importance; for if the principles are established and understood, we can then, *ceteris paribus*, institute the treatment with a greater certainty of producing the desired result. Cases, however, showing the effects of certain influences and remedies in different conditions and under varying circumstances, must be first obtained, these facts being necessary to the deduction of the principles and laws for the successful prevention, treatment and cure of disease.

In the subject under consideration, viz., the principles involved in the reduction of hernia, and the practical application of these principles, there are several points worthy of special attention. And, first, the character and condition of the tissues implicated; second, the state of the alimentary canal with regard to its contents at the time of the strangulation; third, the remedies generally recommended and employed, their modes of action and effects; fourth, the true indications for treatment; and, fifth, the fulfilment of these indications.

In the first, the character of the tissues, these are of several varieties, the principal of which are, viz., the dermoid, cellular, muscular, ligamentous, serous, and mucous.

The excitability, irritability and contractility of these different tissues vary greatly, and the *condition* of them is greatly modified by these properties. The first effect of a descending or strangulated hernia is to excite irritation and pain in the tissues affected, which will, if it is prolonged, implicate the surrounding ones, on the principle that irritation will beget or induce irritation. This may be confined to the region, or extend and disturb the system generally, and consequently produce spasmodic action, both of the voluntary and involuntary muscles, of a

limited or more general character. Then if the excitement continue, congestion will result, on the principle of *ubi irritatio ibi affluxus*; and these still actively persisting, will run into inflammation, which may extend to the whole or a part of the serous and other tissues involved, with an excitation of a general febrile condition of short duration, usually followed soon by great prostration, and ultimately terminate in resolution, effusion, and adhesion, or gangrene and sphacelus with sloughing, and the production of an opening, generally externally, thus relieving the distension and constriction, and consequent irritation and inflammation of the parts, by a false anus, or, by a greater evil, the destruction of the life of the individual affected.

In the second, at the time of the protrusion or strangulation, the alimentary canal may be partially or extensively filled with nutritive and excrementitious matter, or be comparatively or quite empty, but more frequently, probably, in the former condition. This, of course, will require attention in the treatment.

The third is of much interest, and worthy of the most careful consideration. A studious examination of the properties, action and effects of the various remedial agents, and the relation they bear to abnormal conditions, and the means requisite for their removal, will lead to and promote a just discrimination and a proper understanding of the true method of correcting those for which their special employment is requisite, and of none, probably, more so than the formidable one under discussion. These for the present purpose are very numerous, and may be comprised in the two groups of general and local remedies; but it will be better to confine the attention to those most important and generally employed. These are bleeding, warm bath, sedatives (such as tobacco and opium), cathartics, &c.; and to the parts externally, fomentations of various kinds, high and low temperature by means of water or ice, and pressure by the taxis.

Those of the first, such as depletion and tobacco, mostly act only by the sedation and consequent general relaxation which they produce, and thus may, and undoubtedly do, to a certain extent, promote the return of the protruding part; but they, at the same time, place the system in an unfavorable condition, even if effectual, and especially so if this result should not follow, while their local beneficial action is not compensatory for this evil, except when reduction follows, and in that stage in which inflammation is about to, or has already, supervened, when such general remedial measures will be indicated. The first bleeding and warm bath particularly, as they moderate arterial and nervous excitement and thus allay irritation and inflammation, promote relaxation, and increase the secretions, the former also acting as a diverticulum, without depriving the tissues of that inherent power of contractility, except so far as it is dependent upon the loss of their stimulus, blood.

The action of tobacco, however, is of a different character, and very depressive, its influence upon the nervous system and *vis insita* of the tissues, and especially that of the voluntary and involuntary muscular fibre, being primary and direct, and therefore the arterial power fails secondarily. This sedation may be so great, and be continued so long,

particularly if there has been a little indiscretion in its exhibition, that there may not be vital force sufficient to keep up life action, even after the correction of the deranged condition; and if neither great depression nor the reduction takes place, the destruction of this property of the tissues to any extent, will, so far, effectually operate against the beneficial effects otherwise derivable from other and subsequent treatment, and tend to promote the necessity for that opprobria, the operation. Consequently it would seem to be entirely contra-indicated as an internal and general remedy.

There are others, however, affecting the general system, differing from these, in some respects, in possessing, in addition to the sedative or non-irritant action, other properties, the influence of which appears to be more appropriate, and therefore desirable, one of the best, and the type of which, is opium. This, in addition to allaying the general and local nervous, arterial and muscular excitement, thus promoting the relaxation of the general system and of the stricturing part particularly, without that great depression, stimulates the intestinal tissues to contraction, thus exciting and assisting the natural effort to withdraw the incarcerated portion through the constricted orifice by a gentle and steady action, superior to and more successful, if properly taken advantage of, than any artificial process which can be adopted. In other word, it seems to induce relaxation of the voluntary muscles, while it excites contraction of the involuntary.

In the second group of remedies, or those acting more especially through the local influences induced, which according to the mode of exhibition are divisible into internal and external, may be comprised cathartics per orum or anum, and various other agents generally administered by injection, or applied by lotion, fomentation or otherwise, to the parts externally. And, first, the internal remedies. Among the first questions propounded in a case of suspected or asserted hernia, is, has defecation taken place; and if so, has it been perfect? and if not, it supports the idea of the existence of such a state, and further, that in consequence of the complication which is thus indicated, the condition may prove to be of a serious character. Hence it has always been considered, that by exciting the peristaltic action of the intestines, and thus causing or forcing a passage of the fecal matter through them to the natural outlet, this abnormal state would be corrected. This is undoubtedly true in many instances; for by the alternate contraction and expansion of the intestinal tissues, the incarcerated portion may be withdrawn through the stricture. But if this should not prove to be the case, as it often does, the presence and stimulus of substances introduced into the upper part of the alimentary canal above the stricture, for such purposes, by the irritation which they produce will excite an action to dislodge them; and as this cannot be effected by the usual mode and channel, it will cause the reflex condition for their expulsion, viz., the regurgitation through the intestines into the stomach, and thence by emesis per orum. Now this is the tendency of the diseased or deranged action under similar circumstances—first, by the irritation, if sufficient, to excite catharsis; and next, by the increased disturbance, from this

abortive attempt, emesis; and, if the irritation and stimulus of those agents intended to be remedial are superadded, this tendency becomes predominant, and decided activity supervenes, and consequently sterco-raceous vomiting and intussusception, with all their dreadful effects, even to the sacrifice of the life of the unfortunate sufferer, are an almost certain result. Hence this treatment should be instituted with great caution, and, to my mind, not at all primarily, or at least until other measures have failed, or as an adjuvant to other treatment; for it is well known that large quantities of excrementitious matter may accumulate and remain for some time in the intestinal canal without exciting any great amount of, or even any perceptible, irritation.

The reverse of this, however, in the introduction of these stimulating agents into the lower and larger intestines, below the strangulated part, may be of much greater benefit, thus exciting the peristaltic movements of the other and inferior portion of the intestines, thereby causing an evacuation or sufficient action to withdraw, in the same way, the constricted tissues. Yet even here, if they do not succeed in producing the desired effect, they may be of doubtful efficacy, or even positively injurious by the additional irritation to which they give rise; but in conjunction with other properties and remedies which will be mentioned presently, they may be admissible. The action of those different mechanical bodies sometimes introduced per anum, such as candles, long bougies, &c., appears to be similar, by exciting contractility, and they have in some cases succeeded when other means had failed; but as there are more certain modes of effecting this, they should be discarded, except when other objects could not be obtained.

The exhibition, per rectum, of direct sedatives, the most active of which is tobacco, which is usually, however, introduced by this channel, would seem to be entirely contra-indicated from what has already been said, and from a further momentary consideration of their influence, its relation to the effects required, and the condition to be corrected. The action of this class of remedies, and the above-mentioned one will serve for the type, is, as before stated, to allay irritation and destroy excitability and contractility, and thus produce relaxation. The first one is very desirable, but the latter objectionable, particularly in this place, because by the destruction of this inherent power of the intestinal and other tissues to contract, it thus prevents them from responding to appropriate stimuli, and consequently of freeing themselves from their imprisoned condition; hence they must be absolutely injurious, and necessarily annihilate, partially or completely, the advantages otherwise derivable from extraneous aid, for it is principally if not entirely upon the induction of this movement of contraction and retraction, by position, remedies, or the taxis, or all combined, that the operator is enabled to return the protruding part at all. This preservation and use of the vis medicatrix is highly essential, and should not be lost sight of in its application to the treatment of disease.

On the other hand, the action of those remedies, which, in addition to this property of a sedative, possess that of astringency, as acetate of lead, or others having the former in a high degree, yet the latter to a

lesser extent, or probably by allaying irritation excites or permits the natural contractility of the tissues to become active, would seem to be peculiarly applicable. Hence the beneficial effects of opium and its preparations; and to obtain, in the fullest extent, the value of these properties, to render this effort more decided, the combination of this class of sedatives and astringents would be indicated.

In the external treatment a great variety of remedies have also been resorted to, in addition and to promote the efficiency of that all-important one, pressure from the taxis, a few of which will be noticed, viz., application of dry cups, of cold and warm water, ice, fomentations of various medicinal substances, &c., many apparently without any definite idea of their effects, but rather with the vague hope that they might prove efficacious. Some of these, however, are deserving of the greatest attention, and by a correct appreciation of their properties and *modus operandi*, may be made essentially useful in assisting or promoting the action of the other remedial measures.

When ice or cold water, or a low temperature from, or by means of, anything, is applied to a part, it is well known that it acts as a sedative and an astringent, and therefore allays irritation and causes contraction; whilst warm water, or a comparatively moderately high temperature, in addition to the first causes or promotes relaxation. Hence these vary widely in their properties, and require this necessary discrimination for their judicious employment. There are also many other agents possessing these properties, some of which have been previously mentioned, but to a correct application of them it will be necessary to understand, and for this purpose it will now be proper to examine, the

Fourth, or the true indications to be fulfilled. These appear to be—First, the prevention or correction of the irritation both local and general, and consequently the baneful effects of the continuance of such, which may be furnished by the internal exhibition of full and frequent doses of opium or its salts, &c. Second, the contraction of the intestinal and strangulated tissues, and thus to withdraw them through the confining part into the abdominal cavity. This may be induced by astringents, such as acetate of lead, tannin, &c.; the former, in addition to its astringency, exerting a sedative, and thus promoting its former action, while it is, at the same time, assisting the sedative and astringent influence of the opium for the former indication, as it is a well-established fact that this latter produces constipation, which may not, however, depend altogether upon its astringent, but its stimulant or sedative and desiccative influence on the tissues and secretions, thus modifying the hygrometric condition of the mucous and other membranes. Third, position, which should be such as to promote the relaxation of the abdominal and other muscles and tissues concerned in the constriction of the protruded part. Fourth, the more immediate correction of the irritation, and the induction of relaxation of and about the confining tissues. These may be produced by the external application upon and around the tumor, of warm water, warm infusions of belladonna, stramonium, &c., or, probably, better still, by solutions of their active principles atropia, daturia, &c.; or, where none of these are convenient, the leaves of these plants, or those hav-

ing analogous properties, as tobacco, &c. ; but this latter is so readily absorbed, and so powerfully and directly sedative, that if used indiscriminately even here, it may interfere with the successful action of the internal remedies. Fifth, the taxis, the pressure from which should be very gentle, yet steady and prolonged. Sixth, after the reduction, the evacuation of the alimentary canal. This, however, is sometimes spontaneous ; but if not, it can generally be effected with little difficulty, by injection, or otherwise, of mild and soothing cathartics, such as castor oil, &c. These are preferable, because the tendency is still, if it is not already active, to inflammation, and therefore should be carefully guarded against, even to the exclusion of catharsis for a time if the tendency or action should be very strong, although in this stage, from the modified condition of the intestinal membranes, inflammation may arise and depend upon the fecal accumulations. Hence it requires judicious discrimination. Seventh, the prevention and cure of inflammation and its consequences by the usual antiphlogistic treatment, according to the stage and activity of the disease, and the characteristic tendencies of the patient's system.

In the fifth, the fulfilment of these indications, therefore, it would be first necessary to place the patient in such a position as to relieve the distension, and relax as much as possible the abdominal and other muscles and the tissues implicated, then to administer, per anum, anodynes and astringents, such as opium or its salts, as sulphate or muriate of morphia, &c., acetate of lead, or tannin. In the event, however, of the bowels being much loaded with effete matter, large doses of the astringents might be objectionable ; at the same time, enemata of any mild cathartic might be employed, and particularly those possessing an after-astringent action, as rhubarb, cold water, &c., to empty the lower bowels, followed immediately by the anodynes and astringents ; or, in urgent cases, it might be proper and necessary to resort directly to the latter, to the exclusion of the former, till subsequent to the reduction.

Externally, however, as before indicated, instead of an action of contraction to reduce the protrusion, it requires dilatation or relaxation to relieve the imprisoned tissues ; and to produce this it will be necessary to call in the aid of that class of remedies which, in addition to the sedative influence, possess the power of relaxing or dilating. Fortunately, these are readily obtainable ; the best of which is warm water, warm infusions of belladonna, stramonium, or their active principles atropia, daturia, or the leaves of these and analogous plants, those of stramonium and tobacco being very abundant in this country, and therefore easily procured. These, with, if necessary, the taxis, would no doubt prove effectual in the majority of cases, in the earlier stages particularly. Frequently, of course, after the inflammation has advanced to any considerable extent, and effusion and adhesion taken place, this treatment would necessarily prove nugatory, yet would assist materially in the prevention and moderation of such conditions, and thus promote the subsequent treatment which it may be necessary to adopt, but which it is not the design of this paper to discuss.

It will be proper to state, in closing, that these views are not of mo-

mentary origin, but the result of considerable reflection, and announced some time since in a published essay, entitled "*Zoo-adyndamia*," in which, under the head of local inanition, when speaking of local narcotism and its various applications, I glanced at the present subject in the following words—"The *adyndamia* resulting from narcotism will generally disappear if the exciting cause is removed, but is applicable to a great variety of useful purposes, both in surgery and medicine; thus, for instance, to the relaxation of the sphincters, &c.; and for this purpose the class most appropriate is that of which *belladonna* is the type, and may be used for the dilatation of the iris, of the air-cells of the lungs, of the intestinal fibres and rectal sphincters, of the os uteri, of the perineum in labor when the child's head presses too hard upon it, thus permitting its easier passage, and removing the greater tendency to the rupture of that part, of the abdominal ring in the reduction of hernia, &c. From the rapidity and certainty of its action, *atropia* would be most appropriate in the majority of these cases.

"The application of *atropia*, &c., externally, in hernia, to allay the irritation and relax the constricting tissues, and the exhibition by the mouth, and by injection per rectum, of astringents and stimulants, as tannin, acetate of lead, opium, &c., to contract the intestinal tissues, and thus withdraw the incarcerated intestine through the stricture, assisted by position, and, if necessary, the taxis, would most probably afford a safe and effectual mode of reducing hernia, without, in many cases, the necessity of resorting to other means, or an operation."

In the present article, however, it will be observed that I have endeavored to sketch out these principles more in detail, yet necessarily superficially, but, nevertheless, I hope sufficiently full to prove satisfactory.

This treatment of anodynes and astringents is also applicable to intussusception, which is but a hernia in another position, in which the intestine itself is more exclusively concerned; and in some cases of this, as well as the other varieties, accompanied with atony, which would be indicated, to a certain extent, by the absence of the usual signs of activity of the intestinal canal, detected upon auscultation of the abdomen, strychnia or electricity, in connection, would no doubt still further assist in inducing the contraction, and the withdrawal and consequent liberation of the incarcerated and imprisoned tissues.

This treatment, therefore, may be summed up and tabulated in the following manner:—

GENERAL AND LOCAL.

- A. General. Indication, sedation; remedies, the best of which is opium or its salts, exhibited per orum and anum; adjuvants, position, warm bath, bleeding, &c.
- B. Local, internal and external.
 - a, internal; indications, sedation and astringency; remedies, opium, acetate of lead, tannin, &c., per orum and anum, and in addition, in some cases, by the latter, cathartics, as rhubarb, cold water, &c.
 - b, external; indications, sedation and relaxation; remedies, *belladonna*, *stramonium*, tobacco, warm water, position and the taxis.

In conclusion, I submit with diffidence, for the consideration of the profession, these views upon a subject which has been so ably expounded and treated by the most learned and skilful surgeons, yet with the firmest conviction of their truth; and also with the hope that they may excite further reflection and discussion among those better qualified to do justice to a subject of so much importance. I am more encouraged to do so, from the belief that if these views are not correct, and do not, therefore, prove directly beneficial, they may possibly induce that train of thought and practice which may originate and bring forth the true principles, and thus indirectly be serviceable.

Philadelphia, May 28th, 1851.

IMPERFORATE ANUS.

To the Editor of the Boston Medical and Surgical Journal.

SIR,—The following case of imperforate anus ("artresia ani") occurred in my practice during the past week; and as a congenital deformity of this character is rather infrequent, I thought a report of it might not be without interest to many of your readers.

I was called on the 16th inst. to see an infant son of J. L. F., which was three days old. Upon examination, I discovered the nates to be perfectly adherent; and, instead of the natural fissure between them, there appeared to be only a slight ridge, which was continuous with the raphe of the scrotum. There was not the slightest trace of the anus to be discovered; but by placing the finger upon its region, and making firm pressure while the child struggled or cried, the bowel could be felt to press upon the finger. The child appeared otherwise to be perfect, and I learned from the nurse that it had been lively up to the evening before, when it began to be so drowsy that it was with much difficulty it could be aroused, even sufficient to open its eyes. At the time of my visit, the stupor was still more profound, with a purplish and mottled state of the skin; eyes sunken and countenance pinched; denoting that the vital powers of the system were giving way, probably from the irritation arising from the retained secretions in the bowels. I gave it as my opinion to the parents, that, on account of its weakness, it was quite probable that an operation would not prevent a fatal termination; but, of course, its only chance for life was in operating. They decided for me to operate. Accordingly, with the assistance of my brother, Dr. John Mitchell, I proceeded as follows. The child was placed upon the knees of an assistant, with its face downward, and the nates exposed. I then made an incision, with a small scalpel, seven or eight lines in length, commencing a little anterior to the os coccyx, cutting through the skin and a firm ligamentous growth immediately beneath. I now used a long narrow straight bistoury, which I carried up in the direction of the curve of the sacrum about one and a half inch, when it entered the bowel, which was followed by a copious discharge of gas and meconium. There was not more than one or two teaspoonfuls of blood lost during the operation, and yet, at its termination, I found

my little patient was sinking rapidly from the shock upon the nervous system. Various remedies and expedients were resorted to, to arouse him, but without success. His gasps for breath continued to grow less and less frequent, until he ceased to breathe; but, as his heart still continued to beat feebly, my brother commenced the use of artificial respiration. I could feel his heart beat stronger and faster every time his lungs were inflated; and, after using it for five or ten minutes, we had the satisfaction of again seeing the little fellow catch for breath, which he continued to do more and more frequently until natural respiration was established. I mention this as an example of the efficacy of artificial respiration, when properly applied. The child, undoubtedly, was in a state of syncope, so profound that all the usual remedies had failed to arouse him. A moderate dose of castor oil was now ordered to be given, to sweep out the bowels, and a few drops of brandy to be taken at short intervals in a little sweetened milk and water, until he should rally; and a tent, smeared with simple cerate, to be constantly kept in the artificial orifice to prevent its union.

Saturday, 17th.—Less stupor. Bowels have moved several times since last evening, but he still remains quite feeble.

Sunday, 18th.—Sank and died from inanition.

I have every reason to believe that had the operation been performed earlier, before the vital powers began to give way, it would have been successful.

S. MITCHELL, M.D.

Cameron Mills, Steuben Co., N. Y., May 21, 1851.

SUIT FOR MAL-PRACTICE IN VERMONT.

To the Editor of the Boston Medical and Surgical Journal.

SIR,—The suit for mal-practice of Johnson *vs.* Drs. Poole and Carpenter, of Bradford, Vermont, twice noticed in former numbers of your Journal,* has been finally determined. The last hearing was before referees under a rule of court, and terminated in a decision favorable to the defendants. The hearing was tedious and protracted, having lasted eight days, during which an enormous amount of testimony, professional and domestic, was adduced. The principal witnesses upon both sides were the same as noted in former communications to your Journal, regarding this suit. The def'ts, however, in addition to their former testimony, introduced the tables of Dr. Frank H. Hamilton, of Buffalo, N. Y., showing the average results in cases of fractures of all kinds; and also put upon the stand Dr. Gilman Kimball, of the Lowell Hospital, whose experience and intelligence rendered his testimony peculiarly valuable. Thus these worthy and useful physicians, who have for years had the confidence of the community in which they live, after a three years' cruel persecution in the law, and great suffering, mentally and pecuniarily, have finally obtained their discharge. Their manly stand against these speculating suits, is highly honorable to them, and duly

* See Vol. XLI., pages 216 and 500.

appreciated by their professional brethren in this section of the country. By a tithe of their expenses, they might in the first instance have bought their peace; but they were too indignant at the baseness of the attempt to thus extort money from them, to think a moment of a compromise of the kind.

I have just heard that Dr. Dixi Crosby, Professor of Surgery at the Dartmouth Medical College, has been sued for mal-practice in Windsor County (Vt.) Court. While these suits prevail or continue to be brought, it is certainly desirable that those unjustly attacked should, as in this instance, be gentlemen of affluence and high standing. Such suits are exceedingly oppressive and cruel to humble physicians, of limited means. The public mind must be combated into a proper understanding of what constitutes a physician's legal responsibility. After a few contests, such suits will cease. No physician who has the means will infamously submit to be plundered by "buying his peace." And a gentleman of Dr. Crosby's wealth, and well-earned celebrity, will not shrink from doing his part to combat and check this unnatural crusade against one of the most useful of professions, of which he is so distinguished a member.

R. M. K. O.

Bradford, Vt., June 2, 1851.

A NOTE ABOUT THE ANNIVERSARY AT WORCESTER.

To the Editor of the Boston Medical and Surgical Journal.

SIR,—Wednesday, May 28, was a beautiful day. It is remembered as the anniversary of the Massachusetts Medical Society. A number of Fellows left Boston for Worcester in the early train, and in the freedom of the wide country, the freshness of the morning air, and the unobstructed, brilliant light of the sun which the cit never sees or feels, we went along on express speed, to be soon, too soon, at our journey's end.

Worcester is a fine place. A few years ago we remember it as numbering eight or nine thousand people. Now it is towards twenty thousand, at least between sixteen and seventeen. Then how altered it is in its whole expression. Fine blocks of brick and granite buildings, wide streets, with shade trees of various kinds and in the richest green of maturity and health. We walked about and were delighted to be out of reach of door bells summoning us to stern duty, however cheerfully performed. We were glad to be where we could still see distinctly the foot-prints of nature, in the midst and pressure of the movements of man.

In due time we went to the hall where the Society was to hold its annual meeting. The delegates were in good numbers and sufficient strength, between three and four hundred, and assembled from all parts of the Commonwealth. It was pleasant to see old Berkshire's hills and valleys so well represented, and to meet friends whom we have so often sat by and worked with in the meetings in Boston. The meeting was opened, the records were read, and the usual amount of time given to the past, when a subject came up in a report, which, though it was legitimate business, was, at least by the writer, regretted. Annual meet-

ings are indeed for business. But they are for something else. They are for the reciprocation of kind feelings. We meet to see each other—to learn how it has been with us—to hear of professional items which have been new, or of great interest—to help each other by such light as may be imparted—in short, we meet to see each other—to welcome the old, and to become acquainted with the new.

Such, at least, seem objects, and paramount ones, of such meetings. The last one, the Worcester one, was devoted to business of a very disagreeable nature—which filled the most of the time—treading upon the dinner hour, and, worse than all, it was left unfinished. By a happy suggestion the meeting was adjourned to October in Boston, where it is most earnestly to be hoped that all matters which by any chance can disturb the harmony of the next meeting, or diminish its pleasures, may be entirely disposed of, and we can feel that in going to Pittsfield, which is the next place of meeting, we shall have indeed a holiday.

The dinner—This was excellent, most excellent. We confess to some knowledge in such matters, so important on these occasions, and we declare that we have not in memory a public dinner so excellent in itself, and so admirably served, as we sat down to, or rather luxuriously addressed ourselves to, at Flagg's Hall, Worcester. The Merrimac had sent to us its most delicious salmon; the brook trout were in their kind perfect; and the peas from the sunny South lost none of their sweetness in their transit, and were in an abundance beyond praise. We speak of that which we know. But on every table, on all sides, were dishes of every variety, and cooked and served admirably, and each and all of them increasing our obligations to committee, to market, and to cook.

Do you say, dear Editor, that these are matters hardly to be discussed in a notice of the anniversary meeting of one of the most venerable and honored societies amongst us? I do not agree with you. I was at the dinner. I was at its most successful discussion, and if I did not enjoy it a thousand times more than the morning *discussions* in the other hall, I am no true man!

I mean to go to Pittsfield next spring, if so old a gentleman as your correspondent has a right to mean to do anything so long ahead, and there shake friend Childs by the hand in his own ilk—wander about among the hills and fields—breathe the mountain air, eat my dinner with all the pleasure (which to my mind is the best thanksgiving) within the compass of a good appetite and a natural disposition to be pleased, and finally come home again, and tell you how we have fared.

June 2, 1851.

Ever yours,

MEDICAL SCIENCE AND MEDICAL PRACTICE.

[Communicated for the Boston Medical and Surgical Journal.]

Few if any of the sciences are established upon a firmer basis than that of medicine. Its principles have their foundation in nature's laws, and

are consequently immutable. The same elementary and fundamental truths which were discovered and proclaimed two thousand years ago, have lost none of their value, but on the contrary have ever since been corroborated daily. Like the precepts of the gospel, they have withstood the assaults of opposing forces for ages, but are as true to-day as ever they were. Not so with opinions; they are ever changing—taking their character from the evidence on which they rest. Thus have theories had their origin, rise and fall. Thus have systems been reared, cherished, and finally abandoned to make room for more favored rivals, which in their turn are to share the same fate. As in theology, so in medicine, among a multitude of errors there may be found many glorious truths! While the one has ever been receiving the united opposition of a thousand and one *isms*, the other has been constantly opposed by as many *pathies*. Undoubtedly every system of medical practice contains some truth, while all contain more or less error. But medical science lays claim to *all the truth in every system*. Who does not know that the theory of Thomson, "*that heat is life and cold is death*," is, in certain cases, literally true? Who will deny that there is *some* truth in that chief of medical delusions, homœopathy—that "*similia similibus curantur*" is ever true?—that infinitesimal doses are *sometimes* best?—that diet and regimen are all-important in the treatment of disease? Who will deny that the same, with a rational use of water both externally and internally, is often of the greatest service, as in hydropathy? If there was no truth in these systems of practice, they could not exist at all. It is the little truth they contain which enables them to eke out their ephemeral existence as long as they do. But here an important question arises. If regular physicians lay claim to all the truth in the science, why is quackery so much patronized as it is? This leads me to speak of medical *practice*, more particularly in our own ranks. The facilities for entering our profession are so great, that hundreds are induced into it who have neither mental, moral or physical ability to practise the profession with any success. The country is filled with doctors—yes, M.D.s—graduates of our best colleges, many of whom can never practise with credit to themselves or with safety to their patients. It is done in this way:—Physicians are anxious to have students in their offices, as well for the honor of the thing as for the service they receive from them. The colleges are anxious to swell the number of their respective classes, in order that their salaries may swell in proportion. They graduate as many as they can, that their next catalogue may appear well, feeling under some obligations, no doubt, to such as have paid for one or two courses of lectures, remembering, at the same time, that diplomas nett them from fifteen to thirty dollars each. These are some of the reasons why the profession is so full, and why so many are unqualified to become guardians of the public health. The result is, that there are more quacks *with* diplomas than there are *without* them. Medical science is charged with all their errors, and she is thus brought into disrepute. I have seen many a case of simple fever, which if left entirely in the hands of nature would have terminated in health in from twelve to twenty days, protracted to as many weeks by the injudicious

use of powerful medicines administered by those who possess the highest authority to practise attainable in our schools. When such cases fall into the hands of homœopathy, and they forthwith recover by the curative forces of nature, medical science has to suffer, while a medical delusion bears off the palm. Who wonders that men, after having been drugged nearly to death, barely escaping with a broken constitution, should fly to the opposite extreme and become advocates of homœopathy? As much as I admire and value a rational and judicious practice, I had rather be left in nature's care, and take powders of sugar until she restores me to health, than to lay on my back and swallow nauseous drugs every hour, day and night, for months together. Of two evils I would choose the least. Both are aside from the truth, but the former is by far the safest error. There are, it is true, many high-minded and intelligent physicians among us, who are alike an honor to the profession and a blessing to the race; and I would fain have reason to believe that there is no reverse side of the picture. It is of no use to war against quackery, while so much of it is found among ourselves; and who does not see that ignorance in our profession is far more to be dreaded than in homœopathy? Our medicines are "edged tools," which, if used by skilful hands, are capable of doing much good, while in ignorant hands they must, in the nature of the case, produce disastrous results. Homœopathy is a nullity; and consequently is practised with as much safety by the ignorant as by the learned. Nature performs her task equally well whether sugar of milk is given by the one, or the other; and much better then when *interfered* with by injudicious medication.

Well, what is the remedy? We sometimes say, "a disease is half cured when we know what it is." If so, how important it is in this case that our *diagnosis* be correct. Mine is more than hinted at in the foregoing desultory remarks. If I am correct, the remedy is a plain one, though perhaps not of so easy an application as might be desired in this our *free* nation.

H. N. M.

Centreville, R. I., June 3, 1851.

THE BOSTON MEDICAL AND SURGICAL JOURNAL.

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EDITORIAL CORRESPONDENCE.

Greece.—Leaving at this point all further observations on Constantinople, its peculiar institutions, and the illustrations which might be produced of Turkish character, together with such facts as have been collected in other parts of the empire, I must commence a new series of notes by saying that I am now in Greece—in *Athens, too*—surrounded on all sides by those master-pieces of architecture which have been, in their ruin, the admiration of past ages, and the astonishment of all who in modern times have had the satisfaction of gazing upon them. While on the voyage from Smyrna, the port of departure, to Piræus, every island, headland, strait and mountain elevation, brought with it some historical association,

that kept up an uninterrupted interest and excitement. Thus, Lemnos, an island where the Greeks concealed themselves when they pretended to have fled from the siege of Troy; Mytilene, the seventh in importance in the *Ægean* Sea, and the birth-place of Theophrastus, who continued the school of Aristotle—of Pittacus, a sage—Alcæus, a poet—Phrynus, one of the great Grecian musicians, and Sappho, the only celebrated poetess of Greece; Scio, where Ion, a tragic poet—Theopompus, the historian, and Metrodorus, the philosopher and physician, were born—known particularly for its sad misfortunes in the last revolution, when the unmerciful Turks hung thirty-five merchants who were hostages, murdered all the males, sold the females for slaves, and utterly desolated the island with fire and sword; Samos, the reputed birth-place of Juno and Pythagoras, where Herodotus concealed himself when persecuted, and where he wrote a part of the historical works now in our libraries. By and by we came in view of Salamis, and saw the very basin in which the greatest naval battle of antiquity was fought, between the Greeks and Persians. The Greeks had but 380 vessels, while the Persians had 2000. The hill where Xerxes sat to contemplate the carnage he intended to make, and from whence he escaped in disgrace, after witnessing the triumph of Themistocles, the defender of his country, is near the shore. Even the tomb of Themistocles is within a few rods of the entrance into the harbor of the Piræus. The platforms where stood two colossal lions, and whence a chain was anciently drawn across, to lock in or lock out the shipping, together with the foundations of the city walls, are plainly to be seen. A vast population is indicated by the foundations of houses, excavations, and remnant walls. From the quarantine, where I was imprisoned on landing, the Acropolis, with the Parthenon, erected during the administration of Pericles, rises in full grandeur in the distance. Greece is all glorious in the past, and what she now is I shall endeavor to relate. As every where else on the shores of the Mediterranean where there are any obstructions to commerce and the free intercourse of nations, an Italian physician is in charge of the quarantine. He never was seen at all during my incarceration, till the morning on which pratique was given, when two shillings were demanded as his fee! Till these medical intermeddlers with commercial affairs are driven out of the stations they so undeservedly occupy, I despair of any amelioration in the outrageous quarantine impositions of the East. Accompanied by the Rev. Mr. Buel, a Baptist missionary from America, whose politeness is gratefully acknowledged, we examined a large tract of land about the large harbor, once thickly covered with dwellings. The cellars, foundation walls, and wells, are distinctly seen. The heavy wall, too, near the water, which stretches from Athens, five miles distant, is readily traced. On an elevation, near where there was anciently an immense fortification, is an altar cut in the solid rock, which, as one tradition says, was dedicated to the unknown gods. Within the past year, quite a discovery has been made in regard to the method of supplying the population there, in the olden time, with water. The whole region—that is, the section formerly occupied by inhabitants—is threaded in all directions below the surface with an aqueduct on a novel plan. Trenches are cut into the hard rock to the depth of ten, fifteen or twenty feet, according to the condition of the surface, which ramify beyond the present ability of the Demark of the town to trace. In the bottom the water flowed on the same level in every direction. It was covered about a foot from the bottom, and then a space left above for a man to walk every way, under-ground, to inspect and re-

pair the work. Wherever there was a house, a deep well was sunk, into which a branch led off. The aqueduct, therefore, kept each man's well full. The water is supposed to have been brought from the mountains, many miles distant, and the authorities are hoping to trace the aqueduct, now in almost perfect condition, to its source. The wells are extraordinary cuttings—resembling augur holes, they are so admirably cut down into the rock. Streets are now being laid out over this old forsaken, depopulated spot, where there were streets, perhaps, two thousand years ago. The large harbor, in front, is a very beautiful and secure place for shipping, and in the days of Grecian glory must have been magnificently ornamented. The road for five miles, to the city of Athens, is a fine, broad, M'Adamized one, bordered by trees, and the fields are covered most of the way with grape vines, cut near the ground, leaving a short stump, out of which the bearing shoots are to spring for the season. A fence is rarely seen on the farming lands:—mud walls, made of cakes sun-dried, four feet square by one in thickness, like those around gardens at Damascus, are not uncommon. Of the ancient architectural remains of Athens, there is plenty of room for the exercise of the imagination, as they are badly preserved, and give but a faint indication of the original appearance of the edifices to which they belonged. At the Piræus are the foundations of a large temple of Diana. Of the Market House, with a slab bearing the tariff of prices, the Temple of the Winds, the noble columns of the Temple of Jupiter Olympius; the triumphal arch of Adrian; the Lantern of Demosthenes, and the Temple of Theseus—they are all vastly more important and beautiful in books, than on the ground. The Acropolis is a mass of rock forced up through the crust of the earth a few hundred feet above the common level—on the top of which are the remains of the small Temple of Victory, the Propylæa, the Erechtheum, and the massive temple called the Parthenon. On each of them I recognized mouldings, ornamental designs, and a variety of chiselings such as I saw in some of the very oldest temples in Upper Egypt. Within a temporary modern building on the Acropolis, is a collection of such bits of sculptured marble—fingers, toes, headless bodies, extra arms, birds, beasts and reptiles, together with Etruscan vases without number—as laborers are continually finding in their every-day pursuits. Some bronze door furniture, and three copper stone-cutting hammers, used by the old stone dressers, were noticed. All the quarrying and hammering by the ancients was executed alone with copper tools. We saw the slide, on a ledge of rocks, near the location of the observatory, worn smooth, where the ancient Greek women, when childless, used to slide down head first on their backs, as a means of enabling them to become mothers. The Ilyssus is a mere rill, running past the remains of the Stadium, where the races were held. The old Theatre, where 30,000 spectators could listen at once to the plays of Aristophanes, could not be overlooked, although now a mere pit. On the Museum hill is the remnant of a beautiful and costly sculptured monument, with the tomb of Cimon; and near at hand is the Pnyx, a mass of rock cut into steps and seats, with a rostrum in front, where orators addressed all Athens on the great concerns of the people—where Demosthenes, while struggling with Philip, raised a thrill of enthusiasm in the bosom of every Athenian. I went into the identical prison where Socrates drank the fatal poison, and ascended the Areopagus, or Hill of Mars, another mass of slate-stone, into which steps were cut. Paul stood on that very eminence when he declared God, as the maker of the world, to the men of

Athens. I next went to the grove of the Academy, where Plato taught—now a tolerable kitchen garden. It must have been profusely decorated with sculpture, as thousands of pieces are still picked up in working the land. Whoever owns the place has a strange fancy of sticking them into the face of a wall, with cement, where they are re-exposed to destruction. Sophocles, the tragic poet, was born on an eminence a short distance from the site of the grove. By taking a position on the Acropolis, numerous other localities of classical renown are brought within the sphere of vision.

Inhalation of Ether in Sore Throat.—At the last meeting of the Suffolk District Medical Society, a case of abscess of the throat was mentioned, wherein the patient could not swallow liquids for some days, in consequence of the severe pain which was produced. It was therefore determined to try the effects of inhaling ether. When the patient began to feel its intoxicating properties, he was at once enabled to swallow, without pain or difficulty—which was done most greedily. The suggestion and application of this most valuable remedy were matters of great importance in this instance; and it is the communication of such cases at the monthly meetings of the Society, which makes them practically useful to the members.

Trial of Dr. Spencer for Mal-practice.—Dr. Spencer, of Milwaukee, Wisconsin, has been tried before the Circuit Court of that State for alleged mal-practice, and, as we understand by the published report of the trial, was honorably acquitted. The declaration alleges—1st, The giving of large doses of calomel; 2d, Unskilful administration; 3d, Negligence. The case was one of simple *necrosis* or *caries of the jaw*, in a little girl between four and five years of age, attended with secondary salivation, coming on after dysentery. It was most substantially shown, by good authority, that calomel might be used in such cases (dysentery) with the best effect. It was also stated by Dr. S. that he did not use any calomel in this case; and the circumstances and evidence of symptoms, which were testified to by the physicians on the stand, fully corroborated his statement. We had a case some two years since, in a girl of about the same age, wherein caries and necrosis followed an attack of dysentery. We neither used calomel, nor were we subjected to a suit because such diseased action took place in the bones of the little girl. If people could be made to fully understand that there may be a *predisposition* to certain diseases, and that such diseases may be aroused by some exciting cause, we are of opinion that the profession would not so often be assailed and vexed by suits for mal-practice.

Comparative Value of Milk.—The report of a committee appointed by the New York Academy of Medicine, upon the comparative value of milk, formed from the *slop of distilleries* and other food, with chemical and microscopical analyses, by Augustus K. Gardner, M.D., chairman, has been received. One would hardly suppose that there could be found, in this quarter of our globe, *civilized men* who had such cruel hearts, or, to say the least, were so cruelly ignorant, as to treat so useful an animal as the cow in the manner complained of in the report of Dr. Gardner. It appears, from the report of the committee, that there are kept in low sheds attached to a certain distillery in New York, between two and four thou-

sand cows, which derive their *sustenance* from the slops which come from that establishment. The poor creatures are tied up by halters, to stand by day and sleep by night, without bedding, upon the wet floors. Running by their heads is a long trough to contain the slops or swill for their nutriment. They at first refuse to partake of it. But starvation is their only alternative. "It is, indeed, rather offensive, with its peculiar, half sour, half spirituous odor, as it comes bubbling, foaming and steaming from the tanks." "The heat of this liquor is so great that not unfrequently it is served to them when it would scald the finger placed in it. The cattle nearest to the tank, even when inured to it, draw back from the heat of the fumes; the next, excited by appetite, carefully lap it with the end of their tongues, hardened by frequent exposures of this kind; while those further along are enabled to drink it as it comes cooled by the passage." * * * * "From the day of her entrance into this *Bastille*, the cow is not allowed a single draught of pure water. She soon lies down, or mayhap remains standing in a very stupid state. We forbear giving any further particulars relative to such unheard-of atrocities, for it is enough to make one sick at heart to read the narrative; nor do we deem it necessary to allude to the diseased condition of the poor animals, or the pernicious influence their milk and flesh when consumed must exert upon the inhabitants of that city. We are thankful that medical men have undertaken the task of examining into the subject, and have made this exposure. They deserve the thanks of all classes for their humane interference.

The Accommodation of the Eye to Distances.—Mr. John Wiley, of New York, has issued, in a pamphlet of thirty-six pages, an essay on "The Accommodation of the Eye to Distances," by Wm. Clay Wallace, M.D. It is, perhaps, unnecessary to speak of the merits of this essay, as portions of it were read by many of our readers, when they appeared in this Journal in 1844. It is now published in pamphlet form, printed on thick paper, with fifty well-executed illustrations. To those who never read Dr. Wallace's theory of vision, we can say, they would be well repaid for the time spent in the perusal of this pamphlet. It may be had of Ticknor & Co., Boston.

The Physical Health of the Brain.—"Education, in its relation to the Physical Health of the Brain. A Lecture delivered before the Rhode Island Institute of Instruction, by I. Ray, M.D., Superintendent of the Butler Hospital for the Insane. Published by Ticknor, Reed & Fields. Boston, 1851." This is a practical and well-written lecture, treating of a subject that has been too much overlooked by parents and teachers of schools. It is hoped that the principles laid down by Dr. Ray, for educating children, may be carefully considered by those who have them under their charge. The little book should be read by heads of families, and its precepts adopted.

Memoir of Dr. Amos Twitchell.—Our thanks are due to Dr. H. I. Bowditch, of this city, for a copy of his memoir of Dr. Amos Twitchell. The reputation which Dr. Twitchell had, when living, as an eminent surgeon, was rarely equalled in this country. He may justly have been called a

"Napoleon in surgery," for he was a bold and fearless operator. It appears from the memoir that he had many adversities to contend with in acquiring a medical education, as also in getting into practice after finishing his studies. There is nothing very remarkable related of him in the memoir (save the case of taking up the carotid artery, which was the first time that the operation had been done, or it was supposed so by him), and were it not prepared by a most able scholar and accomplished writer, it might be called rather prosy. The fact is, Dr. Twitchell never made any record of his surgery, or of his cases in medical practice; and, as we have been informed, very few papers of any kind were left, that would furnish more than a meagre outline of his long and useful life. We wonder Dr. Bowditch could have made so much out of them, for it is certain few others would have succeeded so well.

Intermarriage.—Messrs. Lindsay & Blakiston, Philadelphia, have just published a new edition of Walker's celebrated work on "Intermarriage, or the mode in which, and the causes why, beauty, health and intellect result from certain unions; and deformity, disease and insanity from others." It is an exceedingly interesting book, and one that may profitably be read by adults.

Medical College of South Carolina.—We have received a Catalogue of the Trustees, Faculty and Students of the Medical College of the State of South Carolina, for the session of 1850-51, from which it appears there were 230 students attending the medical lectures, 65 of whom, having passed the usual examination, received their diplomas as doctors in medicine. The facilities which this school possesses for furnishing a thorough practical medical education to students are very great, and it affords us much pleasure to hear of its prosperous condition.

Electro-Magnetism, its Application to the purpose of Fire Alarms.—Dr. W. F. Channing has recently exhibited to the municipal government of this city, an ingenious piece of mechanism, which, by the aid of magnetism, is intended to give an alarm upon the several bells in the different sections of a town or city. The introduction of such a contrivance would be attended with much benefit in cases of fire; as any person, in the immediate neighborhood of one of them, could instantaneously communicate the fact to the City Hall, from whence the bells in all parts of the city could be rung; and further, by a system which would be adopted in the style of ringing, the locality of the fire might easily be made known to the citizens. In case of riot, or for other purposes wherein it might be necessary for the people to congregate, it would also be most serviceable. There really seems to be no end to the useful application of this agent: space is annihilated by it in the transmission of intelligence to the various parts of countries; the bells of churches can be rung simultaneously; water is to be separated into its original elements, and light obtained from it that will illuminate buildings. This, truly, is the age of wonders, and we are prepared not to be astonished at any thing, be it ever so marvellous a sight or mysterious a sound. We hope Dr. Channing may be fully remunerated for his important invention by our city authorities, and that they will immediately adopt the plan.

Departure of Dr. Warren for Europe.—Dr. John C. Warren, of this city, Emeritus Professor of Anatomy in Harvard University, left Boston on Saturday last, on a voyage to Europe. We learn that it is his intention to remain abroad two years. We trust that his life may long be continued, and that he may return to us with improved health.

Suffolk District Medical Society.—At the last meeting of this Society, it was unanimously voted, that at each future meeting for medical improvement, some subject shall be selected as the subject for discussion at the next meeting.

It was farther voted, that the subject for consideration at the meeting on the last Saturday in June, shall be "The Treatment of the Convulsions of Children."

It was voted, to request the insertion of the subject for discussion in the numbers of the Boston Medical and Surgical Journal for the two weeks preceding the meeting.

H. W. WILLIAMS, Secretary.

American Academy of Arts and Sciences.—The annual meeting of this institution was held on Tuesday, 27th May. when the following official board were re-elected for the year ensuing: Dr. Jacob Bigelow, *President*. Hon. Edward Everett, *Vice President*. Dr. Augustus A. Gould, *Corresponding Secretary*. J. Ingersoll Bowditch, *Treasurer*. Dr. Henry I. Bowditch, *Librarian*. Prof. Eben N. Horsford, Prof. Daniel Treadwell, Prof. Joseph Lovering, Prof. Henry L. Eustis, and Dr. Morrill Wyman, *Rumford Committee*. Prof. Joseph Lovering, Prof. Louis Agassiz, and William C. Bond, *Committee on Publications*. Dr. A. A. Gould, Dr. D. Humphreys Storer, and Dr. Samuel L. Abbott, *Committee on the Library*.

Honorary Members of the Medical Society of Virginia.—The following gentlemen were elected honorary members at the last meeting of the Medical Society of Virginia.

Dr. James Moultrie, president of the American Medical Association, of Charleston, S. C. Dr. A. H. Stevens, professor in College of Physicians and Surgeons, of New York city. Professor Jeffries Wyman, M.D., &c., of Harvard University, Mass. Dr. George D. Gibb, F. R. C. S. I., &c., of Montreal, Canada.

TO CORRESPONDENTS.—Dr. Williams's paper on the Extraction of Cataract, Dr. North's on Watery Places, and the report of an operation by Prof. Olympus, of Athens, Greece, for Elephantiasis of the Scrotum, are on file for publication.

The editor of the "Stethoscope" will please accept our thanks for forwarding to us printed sheets of that Journal containing the proceedings of the American Medical Association, in advance of the publication of the June number.

Subscribers who have written to the Publisher of this Journal for a copy of No. 1, Vol. 42, and others who may be in want of that number, are informed that it has been re-printed and they can now be supplied with it.

Deaths in Boston—for the week ending Saturday noon, June 7, 66.—Males, 32—females, 34. Accidental, 1—disease of bowels, 1—inflammation of bowels, 2—disease of brain, 1—consumption, 16—convulsions, 5—cancer, 1—croup, 1—debility, 1—diarrhoea, 1—dropsy of the brain, 2—drowned, 2—exhaustion, 1—typhoid fever, 1—scarlet fever, 2—lung fever, 5—gangrene, 1—disease of heart, 3—infantile, 2—disease of the liver, 1—inflammation of the lungs, 3—marasmus, 2—measles, 1—old age, 1—palsy, 1—puerperal, 1—smallpox, 6—tumor, 1.

Under 5 years, 22—between 5 and 20 years, 6—between 20 and 40 years, 20—between 40 and 60 years, 11—over 60 years, 7. Americans, 25; foreigners and children of foreigners, 41.

The above includes 10 deaths at the City Institutions.

The Offspring of Deaf and Dumb Parents.—Of about 200 deaf-mutes, who attended a festival at the Asylum in Hartford last September, 103 had been or are now married. Both parties were deaf and dumb in 40 of these marriages; in 23 one could hear and speak. From the 35th Annual Report we learn that 31 of these couples "had not become parents, but the remaining 72 were the parents of 102 children, of whom 98 could hear and speak, and four only were deaf and dumb. One of the four was the only child of his parents, both of whom were congenitally deaf. Besides the parents, the paternal grandfather, a sister of the father, and two sons of this sister, were deaf and dumb; and on the mother's side, an aunt of the child was deaf and dumb. In the other family, that of the three children, the father lost his hearing by disease at two years of age, and had no known relative deaf and dumb. The mother was born deaf, and had a deaf and dumb brother. These were the only cases of the kind present at the festival. The question whether the children of a deaf-mute parent are more likely than others to be deaf and dumb, has not been solved in any other country so satisfactorily as in our own. In Europe comparatively few of the deaf and dumb have married, and those we believe have generally selected hearing partners. Here, however, in the large majority of cases, both husband and wife are mutes. The per centage of deaf children, the offspring of such marriages, is undoubtedly somewhat greater than among an equal number of the children of other parents, taken like the deaf and dumb from the various conditions of life. But if the facts above stated afford a fair criterion for judging on this question, we are safe in the belief that this result might be obviated in a great degree, if *intermarriage* could be prevented between those deaf-mutes, whose parents or other near relatives seem to have been constitutionally prone to the infirmity of deafness. This could only be done by moral suasion; but if influential people, and especially the parents of deaf-mutes, were deeply impressed with the idea that marriage should not take place between two persons, each belonging to a family in which the great evil of deafness was constitutional, lest the offspring of that union should be deaf and dumb, much might be done towards preventing the extension of the evil. But there are other facts on this subject which would seem at first view, at least, to confound the speculations we have based on the cases above mentioned. For instance, a husband and wife, once pupils here, were both congenitally deaf; but neither, as we believe, has had any deaf and dumb relative, except their three children, and these were all deaf from birth. The circumstances of another of our former pupils and his family connections are as follows:—His brothers and sisters hear, and they married hearing persons. One of the brothers has two deaf and dumb children, one sister has one, and another two deaf and dumb children, and one of the latter has a deaf and dumb child. There is besides one other deaf-mute in the circle of relatives, possibly more than one, though no one of the ancestors is known to have been a deaf person. The man first referred to married a deaf and dumb woman, and their five children all hear and speak."

Simond's Mortuary Tables.—We have received from Dr. J. C. Simonds, of New Orleans, his classified tables of the deaths in that city and Lafayette, during the year 1850. They are very carefully prepared and arranged, making them desirable to those in want of such statistics, and valuable as a mode of comparing the mortality of New Orleans with that of other cities.